



Farm to School Program

Farm Worksheet

Date:	
Farm Name:	
Brand Names:	
Contact Person and Title:	
Address:	
City:S	
Phone Number: ()Fa	
E-mail:\	
Total Production Acreage:	
Region: 1 2 3 4 5 6 4	(See map on Web site for details)
Shipper Codes: CA 🗆 CS 🖵 GAP 🖵 HC 🖵	ICE LTL TL
Please list the counties you are interested in servicing:	
Produce and Seasonal Availability:	



Return to: Farm to School

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